Release Notes 2.6

XML submission file

Tag name changes are included in the xml layouts.
Submission information has changed to www.wisconsinedi.org from www.familycarewi.org, which originally was going to change to www.ltcareencounterreporting.org. This enables pre-qualifying of files as well as being environment specific without maintaining more then one version.
The XML with shaded changes will be sent as separate documents.

Content Edits

Edit severities will change for the following:

Edit D007D (The Paid Amount for a denied transaction must be zero) will be changed to Batch Accept.

Edit D007F (No adjustments can be made to a denied claim) will be turned off.

Edit D018F (When MA Billing Provider ID is provided, it must be within date range) will be changed to Batch Accept.

Edit D024E (When MA Rendering Provider ID is provided, it must be within date range) will be changed to Batch Accept.

Edit D046G (A Procedure Code or a Revenue Code is required) will be changed to Batch Accept.

Edit D071B (When the Recipient Birth Date is provided, it must be less than or equal to the From Date of Service) will be changed to Batch Accept.

Edit D072B (When the Recipient Death Date is provided, it must be less than or equal to the Posting Date) will be changed to Batch Accept.

Edit D073A (When the DRG is provided, it must exist in the lookup table) will be changed to Batch Accept.

Edit D073E (When the DRG is provided and the code is in the master lookup table, it must be within the date range, based on dates of service) will be changed to Batch Accept.

Edit D073F (The DRG must be null for a member share transaction) will be changed to Batch Accept.

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Edit D076E (The Service Delivery Type must be provided) will be turned off.

Edit D077D (If the Ninth Diagnosis Code is provided and the code is in the Master/ Lookup Table, then it must be within date range based on dates of service) will be changed to Batch Accept.

New edits for NPI

D019F When the SPC or Procedure Code indicates a Health/Medical indicator, then the Billing Provider ID Qualifier or Rendering Provider ID-Qualifier must be "XX". FC only

D020E When the Billing Provider ID Qualifier or Rendering Provider ID Qualifier is "XX", then a valid 10 digit NPI code must be provided. All organizations.

These will be implemented as warnings.

Parser Edit Consolidation
New error messages have been assigned to one edit instead of several.

EX: New
D002C Submitter Organization ID must be present, have a numeric value with a fixed length of 8.

Replaces:
D002C The CMO MA ID must be provided and must be an alphanumeric data type.
D002D The CMO MA ID must conform to the max length specified in the data dictionary.
D002J The CMO MA ID must be provided.

Recent issues:
Embedded spaces .
Obsolete old tags (SPC Code, SPC Subprogram, Principal Diagnosis Code and Type of Service).
Counties are encouraged to send test XML beforehand.

New Encounter Reporting Website (Includes updated and prior version documentation i.e. data dictionaries, xml layouts, edits, etc.)   http://dhs.wisconsin.gov/ltcare/encounter/

NDC Lookup table enhancement to include for Blue Book table OTCs and obsolete date plus 2 years for validity if the termination date is null.

Allowed Amount This will be an optional field and edit D061D will be obsoleted. Edit D061E will remain a Batch Accept error.

Diagnosis Code Additional 9 added to FC.

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XML tag names 6/16/2007

Existing Tags	New Tags	Pgm	New xml format name
Primary ANSI Reason Code	Claim Adjustment Reason Code	All	claim_adjustment_reason_code
Second ANSI Reason Code	Claim Adjustment Reason Code 2	All	claim_adjustment_reason_code_2
Third ANSI Reason Code	Claim Adjustment Reason Code 3	All	claim_adjustment_reason_code_3
Fourth ANSI Reason Code	Claim Adjustment Reason Code 4	All	claim_adjustment_reason_code_4
Fifth ANSI Reason Code	Claim Adjustment Reason Code 5	All	claim_adjustment_reason_code_5
Sixth ANSI Reason Code	Claim Adjustment Reason Code 6	All	claim_adjustment_reason_code_6
E Code	External Cause of Injury Code	WPP, SSI	external_cause_of_injury_code
First Modifier Code	Procedure Code Modifier 1	All	procedure_code_modifier_1
Second Modifier Code	Procedure Code Modifier 2	All	procedure_code_modifier_2
Third Modifier Code	Procedure Code Modifier 3	All	procedure_code_modifier_3
Fourth Modifier Code	Procedure Code Modifier 4	All	procedure_code_modifier_4
National Place of Service	Place of Service	All	place_of_service
Patient Discharge Status	Patient Status Code	WPP, SSI	patient_status_code
Primary Diagnosis Code	Diagnosis Code Principal	All	diagnosis_code_principal
Second Diagnosis Code	Diagnosis Code Additional 2	All	diagnosis_code_additional_2
Third Diagnosis Code	Diagnosis Code Additional 3	All	diagnosis_code_additional_3
Fourth Diagnosis Code	Diagnosis Code Additional 4	All	diagnosis_code_additional_4
Fifth Diagnosis Code	Diagnosis Code Additional 5	All	diagnosis_code_additional_5
Sixth Diagnosis Code	Diagnosis Code Additional 6	All	diagnosis_code_additional_6
Seventh Diagnosis Code	Diagnosis Code Additional 7	All	diagnosis_code_additional_7
Eight Diagnosis Code	Diagnosis Code Additional 8	All	diagnosis_code_additional_8
Ninth Diagnosis Code	Diagnosis Code Additional 9	All	diagnosis_code_additional_9
Primary ICD9 Procedure Code	Procedure Code ICD Principal	WPP, SSI	procedure_code_icd_principal
Second ICD9 Procedure Code	Procedure Code ICD Additional 2	WPP, SSI	procedure_code_icd_additional_2
Third ICD9 Procedure Code	Procedure Code ICD Additional 3	WPP, SSI	procedure_code_icd_additional_3
Fourth ICD9 Procedure Code	Procedure Code ICD Additional 4	WPP, SSI	procedure_code_icd_additional_4
Fifth ICD9 Procedure Code	Procedure Code ICD Additional 5	WPP, SSI	procedure_code_icd_additional_5
Sixth ICD9 Procedure Code	Procedure Code ICD Additional 6	WPP, SSI	procedure_code_icd_additional_6
Primary ICD9 Procedure Date	Procedure Date ICD Principal	WPP, SSI	procedure_date_icd_principal

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Second ICD9 Procedure Date	Procedure Date ICD Additional 2	WPP, SSI	procedure_date_icd_additional_2
Third ICD9 Procedure Date	Procedure Date ICD Additional 3	WPP, SSI	procedure_date_icd_additional_3
Fourth ICD9 Procedure Date	Procedure Date ICD Additional 4	WPP, SSI	procedure_date_icd_additional_4
Fifth ICD9 Procedure Date	Procedure Date ICD Additional 5	WPP, SSI	procedure_date_icd_additional_5
Sixth ICD9 Procedure Date	Procedure Date ICD Additional 6	WPP, SSI	procedure_date_icd_additional_6
CMO MA ID header and detail	Submitter Organization ID	FC	submitter_organization_id
Organization ID header and detail	Submitter Organization ID	WPP, SSI	submitter_organization_id
From Date of Service	Service Date From	All	service_date_from
To Date of Service	Service Date To	All	service_date_to
From Statement Covers Date	Statement From Date	WPP, SSI	statement_from_date
To Statement Covers Date	Statement To Date	WPP, SSI	statement_to_date

Additional Tags for future enhancement	These Tags will replace the existing TPL PAID AMOUNT tag at a later date.		
Medicare Paid Amount		All	medicare_paid amount
Medicare COB Type		All	medicare_cob_type
Other Payer Paid Amount Primary		All	other_payer_paid_amount_primary
Other Payer COB Type Primary		All	other_payer_cob_type_primary
Other Payer Paid Amount Secondary		All	other_payer_paid_amount_secondary
Other Payer COB Type Secondary		All	other_payer_cob_type_secondary

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